

Please type a plus sign (+) inside this box

# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.: CM03764J  
 First Inventor: Ali Behboodian  
 Title: METHOD FOR FAST DYNAMIC ESTIMATION OF BACKGROUND NOISE  
 Express Mail Label No.: EV 302727987US

## APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

Mail Stop Application  
 ADDRESS TO: Commissioner for Patents  
 P.O.Box 1450  
 Alexandria, VA 22313-1450

<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form in duplicate          (Submit an original and a duplicate for fee processing)</p> <p>2. <input type="checkbox"/> Applicant claims small entity status          See 37 CFR 1.27</p> <p>3. <input checked="" type="checkbox"/> Specification [ Total Pages <input type="text" value="13"/> ]          (preferred arrangement set forth below)          -Descriptive title of the invention          -Cross Reference to Related Applications          -Statement Regarding Fed sponsored R&amp;D          -Reference to sequence listing, a table,          or a computer program listing appendix          -Background of the Invention          -Brief Summary of the Invention          -Brief Description of the Drawings (if filed)          -Detailed Description          -Claim(s)          -Abstract of the Disclosure</p> <p>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [ Total Sheets <input type="text" value="4"/> ]</p> <p>5. <input type="checkbox"/> Oath or Declaration [ Total Pages <input type="text" value="4"/> ]</p> <p>a. <input checked="" type="checkbox"/> Newly executed (original or copy)</p> <p>b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d))          (for continuation/ divisional with Box 18 completed)</p> <p>i. <input type="checkbox"/> DELETION OF INVENTOR(S)          Signed statement attached deleting inventor(s) named in the prior application, ee 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>6. <input checked="" type="checkbox"/> Application Data Sheet under 37 CFR 1.76</p>	<p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence (if applicable, all necessary)</p> <p>a. <input type="checkbox"/> Computer Readable Form (CFR)</p> <p>b. <input type="checkbox"/> Specification Sequence Listing on:          i. <input type="checkbox"/> CD-ROM or CD-R (2 copies);          ii. <input type="checkbox"/> or paper</p> <p>c. <input type="checkbox"/> Statements verifying identify of above copies</p>
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## ACCOMPANYING APPLICATION PARTS

9. ☒ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement ☐ Power of Attorney  
 (when there is an assignee) Attorney
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)  
 (Should be specifically itemized)
15. ☐ Certified Copy of Priority Document (if foreign priority is claimed)
16. ☐ Nonpublication Request and Certification under 35 .U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent
17. ☐ Other: \_\_\_\_\_

18. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in- Part (CIP) of Prior Appl. No.

Prior Appl. information: Examiner:  Group/Art Unit:

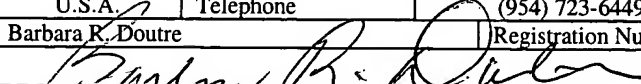
## 19. CORRESPONDENCE ADDRESS

☒ Customer Number or Bar Code Label

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☐ Correspondence address below

Name					
Address					
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Country	U.S.A.	Telephone	(954) 723-6449	Fax	(954) 723-5599
Name	Barbara R. Doutre		Registration Number (Attorney/Agent)		39,505
SIGNATURE			Date	7/24/03	

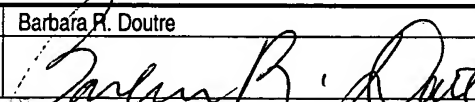
19704 U.S. PTO

10/626321

07/24/03

<b>FEE TRANSMITTAL</b> <b>for FY 2003</b> Patent fees are subject to annual revision  <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		<b>Complete if Known</b>	
		Application No.	
		Filing Date	
		First Named Inventor	Ali Behboodian
		Examiner Name	
		Group Art Unit	
TOTAL AMOUNT OF PAYMENT		(\$)	790.00
		Attorney Docket No.	CM03764J

<b>METHOD OF PAYMENT (check all that apply)</b>				<b>FEE CALCULATION (continued)</b>																																																																																																																																																																																					
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 50-2117 Deposit Account Name: Motorola, Inc.				<b>3. 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<b>SUBMITTED BY</b>		<b>Complete (if applicable)</b>	
Name (Print)	Barbara R. Doure	Registration No. (Attorney/Agent)	39,505
Signature		Telephone:	(954) 723-6449
		Date	7/24/03